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ABSTRACT

Intended for parents of hyperactive children, the two booklets provide general information on the management of hyperactivity and a summary of a video taped parent discussion group. Sections are on the following topics: what is hyperactivity? what causes hyperactivity? traits of hyperactive children, concerns and feelings of parents, behavior management, selected comments from the video tape group discussion, and how to form a discussion group of your own. Summarized in the second booklet are eight segments of the 30-minute video tape in which individual parents share their concerns. (DB)

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You Are Not Alone

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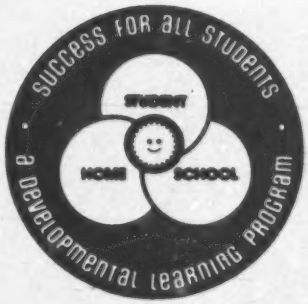
Nobody will listen!

HELP! HELP!

I could have killed him!

ANGER

I feel all alone!



Everybody Blames me

CONFUSION

Maybe it's just bad behavior

GUILT

FRUSTRATION

EC081447

A PARENT DISCUSSION OF HYPERACTIVE CHILDREN AND THE GROUP PROCESS.

P R E F A C E

"IT IS OUR HOPE THAT THIS BOOKLET WILL BE USED BY PARENTS TO HELP YOU DISCOVER THAT YOU ARE NOT ALONE - - MANY ARE LIVING WITH A HYPERACTIVE CHILD. WE HOPE THAT IN SHARING OUR THOUGHTS WITH YOU, WE CAN SHOW WE, TOO, CARE."

SHARING IS CARING - YOU ARE NOT ALONE

PUBLISHED BY:

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INTRODUCTION

"Alone -- apart from others; without anyone or anything else; unique." This is how most parents of a hyperactive child feel when they finally realize that he is hyperactive. But, they are not alone and neither are their children. There are many people who have this problem and have already faced or are facing the same frustrating situations.

We are a group of parents who have hyperactive children. We meet to discuss the various topics that you will be reading about later in this booklet and to provide mutual encouragement in dealing with this problem. We are not professionals. We have no special training in the fields of psychology, psychiatry, or medicine. We simply have a common problem and therefore similar personal experiences that we have shared with each other and would like to share with you. The following pages cover the subject of hyperactivity as we - the parents - see it.

It is our hope that this booklet will be of some assistance to you by furthering a better understanding of this problem and by pointing out the similarities we have found in the symptoms, activities, and management of our hyperactive children. It is our attempt to put into everyday language the frustrations, guilt feelings, and sensitive emotions that are commonly associated with hyperactive children.

GROUP PREAMBLE

The following preamble states clearly our desires and aims:

WE, THE PARENTS OF HYPERAGTIVE CHILDREN, IN ORDER TO CREATE A MORE PEACEFUL HOME-LIFE, HELP THOSE HYPERACTIVE CHILDREN LEAD A MORE MEANINGFUL PERSONAL LIFE, PROMOTE UNDERSTANDING AND ACCEPTANCE IN OTHERS, AND RETURN THE JOY OF LIVING TO OURSELVES AND KINDRED, DO FORM THIS DISCUSSION GROUP.

WHAT IS HYPERACTIVITY?

Hyperactivity is just one of many terms used for this problem. Even the so-called experts cannot agree; depending on the author or speaker, the term may be hyperactivity, hyperkinetic, minimal brain dysfunction, or minimal cerebral dysfunction. Regardless of the term used, the problem is the same. Basically the hyperactive child is one who is more active than most other people his age and these actions are frequently inappropriate and without aim or purpose.

The children we are discussing are not retarded; they have average or above average intelligence. For varied reasons they cannot react to people and things in socially acceptable ways.

They are frequently labeled *"bad"* or *"trouble-maker"* while not intending to be bad. Many times they feel upset and dejected because they do not understand why they seem to be always doing the wrong thing or even what it was that was wrong.

They are in constant motion, not because they enjoy it, but because they have this drive to MOVE - anywhere, anytime, in any manner - and have not yet learned to control and redirect this drive into constructive or meaningful activities.

These youngsters are very impulsive and tend to blame others (parents, friends, teachers, etc.) if things go wrong. They cannot be swayed by common reasoning; their behavior is not changed by punishment.

WHAT CAUSES HYPERACTIVITY?

We have found that there is no one cause of hyperactivity. In fact there is much dissension about the cause or causes. In some instances it is a matter of neurological impairment - something is physically wrong with the nervous system, the brain in particular. Perhaps it is an immature portion of the brain or slight damage due to a difficult delivery, a fall, an infection, or a high fever. In others there is a chemical imbalance - such as hypoglycemia (low blood sugar). And in still others it is the fact that some people are born with a much higher activity level. It is not caused by some mysterious something the parents did or did not do.

There are times when it is relatively easy to determine the reason why a particular child is hyperactive. With others it can be determined only after extensive testing and investigation. And, sorry to say, it is not always possible to identify the cause in all-too-many children.

TRAITS OF HYPERACTIVE CHILDREN

Throughout the two and a half years our group has been meeting, we have found many characteristics and behaviors in our children that are very similar. Not each child has all of these listed traits; some have more than others. Keep in mind, this is not a list composed by professionals; it is things we, as parents, have noted in our children.

1. Very active as small babies; kicked, rolled, collicky, and irregular sleep.

2. As toddlers "never walked, but ran".

3. When starting school more difficult to manage - restless, inattentive and immature.

4. Unable to get along with peers and siblings.

5. Extremely noisy - talkative and verbal "noises".

6. Extremely lovable child (at times).

7. More common in boys than girls.

8. Trouble at mealtime.

9. Poor sleep habits.

10. Continuous motion and movement.

11. Termed the "terror of the neighborhood".

12. Don't seem to understand the "why" for their actions.

13. Pesters, teases, and picks on others.

14. Defiant and easily frustrated, unpredictable, destructive, impatient, and impulsive.

15. Shows streaks of violence.

16. Over-reacts to common stimuli.

17. Seems always to receive blame.

18. Has a poor self-concept.

19. Needs constant reinforcement.

CONCERNS AND FEELINGS OF PARENTS

During the sharing of concerns, we have noted the following similarities in parent behavior and feelings among group members.

1. Frustrated and guilt ridden and embarrassed.
2. Receive excessive criticism from friends, neighbors and family.
3. Concerned and uninformed about medication.
4. Lack of knowledge and understanding of problem and how to deal with it.
5. Temper becomes short.
6. Develop extreme dislike for child at times - *"I hate my child"*.
7. Feel nothing *"works"* to help.
8. Doesn't know where to start with problem.
9. Recognize need to be firm and consistent.
10. Concerned about child's ability to develop socially accepted values.
11. Feel like we're on an *"emotional roller coaster"*.
12. Fearful of own behavior when frustrations are high - *"I feared I might injure or kill him"*.
13. Find reading literature helps.
14. Discussing problem with others helps.
15. Being a part of a group has made us feel *"not all alone"*.

BEHAVIOR MANAGEMENT

We feel that our suggestions for behavior management of the hyperactive child could be adapted to both the home or the school setting. In other words, they could be practical suggestions for either the parent or the teacher. However, it must be kept in mind, as we mentioned before, that what works with one child may not work with another - and it may not always work more than once with the same child.

WE SUGGEST - - -

1. Be as consistent as possible. Use words that will insure consistency and determine and use precise limits. Establish routines.

2. Teach by example. Show what to do and practice the things you want him to do.

3. Let your child feel he is an important part of the family group.

4. It will not help if you try to lecture.

5. Usually there can be no reasoning or discussion while the child is very upset. There must be a cooling or settling time after a tantrum, outburst, or upset.

6. If he becomes excited or uncontrollable in a group, find a quiet area where he can be.

7. Don't threaten - memory is often short and he will soon forget.

8. Don't punish by putting to bed.

9. Don't punish by telling him you won't love him.

10. Don't scold or nag in a loud voice.

11. Friendly firmness rather than punishment is basic for discipline.

12. Give a warning for things to be done - allow five minutes or so before asking for it to be done.

13. Don't use reasoning or explanation often, especially with the very young. They tend to confuse.

14. Tell him what *"to"* do rather than what *"not"* to do.

15. Act as if you expect him to obey.

16. Give one direction at a time and keep it simple when starting. Often the situation is out of hand before you realize what is happening, and you cannot tackle the whole thing at one time.

17. What seems like stubbornness may be caused by fatigue, hunger, illness, a way of getting attention, or comparison to other children in the home or neighborhood, or just plain over-expectations of your child.

18. Don't expect more than your child is capable of doing.

19. Repetition is important.

20. Allow plenty of time. Don't rush, but don't let him *"fool around"*.

21. They need *"flexibility with structure"*. This sounds contradictory, but it is important.

22. They need varied, short-term activities.

23. Rewards help. Especially if the reward is someone's time with them - Mom's, Dad's, Grandparents', or teachers'.

24. Reinforce positive behavior.

25. When correcting him, make corrections of the action or behavior, and not the child.

26. Remember that if they have the *"name"*, they will play the *"game"*.

27. Be generous with praise.

COMMENTS FROM A VIDEO TAPE - GROUP DISCUSSION

We had one of our group sessions video taped as an aid to in-service for other parents and teachers. We expressed our thoughts, frustrations, and suggestions for others. Below are some direct quotes from the tape that may help you share our feelings. The comments may seem very isolated to many readers; but to the parent of the hyperactive child, there will be many things that will trigger the idea, *"That could be me talking".*

"Boy! Boy! Boy! Boy! Does that tell you anything, folks? Do we have parents of any hyperactive girls in our group?"

"Do they give any clues to tell how to survive?" (following discussion of TV programs)

"I have done all that I know what to do!"

"The only time he stops is when he is finished!"

"As he gets older, the tantrums seem to be shorter in time."

"He wants you to do something 'right now', but he can't wait for anything. For him, everything has to be 'now'."

"He screams, but not necessarily words - just noises."

"You get the feeling that if you touch them, you will kill them."

"They just don't hear you!"

"You take things a day at a time - no, I think we should say an hour at a time! No, I think I have to live a minute at a time to keep my sanity."

"The type of parent or teacher I would want for my child would be someone who is not too rigid - someone who is flexible."

"What works best for one child will not necessarily work for another child."

"There is just no sense trying to talk to him at the immediate time of the tantrum."

"He's his own worst enemy!"

"Aren't we trying to work together - the home and the school? We will get nowhere if we don't."

"The parent-teacher-child conference was a help. Then he did not have to wonder what we were talking about and could add to the suggestions."

"I hate people! They just don't understand what I am going through."

"When someone asked what are you going to do with that kid, I screamed 'what in hell do you want me to do'."

"I felt so all alone before I joined the group."

"I never though my son would be able to function in a regular classroom. Thank God and thank the Essexville-Hampton School System, I was wrong."

"In-laws, neighbors, friends - everyone is a problem. They don't understand the problem and they don't even want to. I try to give them information to read and they are not interested!"

"We use the term hyperactive and hyperkinectic interchangeably in the group."

"We are constantly working to help him build his self image."

"I went to the Little League coach and told him Mike was hyperactive. He had read some about it and was very understanding."

"I found that keeping a log or a journal helped. I could study it over to try to find a pattern of things that were upsetting Bruce...."

"I found keeping a journal helped me to get rid of some of my own frustrations - by writing about them."

"I've got a lot of problems myself."

"A lot of people feel hyperactivity is just an excuse for poor behavior."

The above video tape is available upon request of

PROJECT FAST, TITLE III
303 Pine Street
Essexville, Michigan 48732
(517) 893-5743

COMMENTS FROM PARENTS
REGARDING THE GROUP SESSIONS

Just knowing "I'm *not the only one with a hyperactive child,*" is probably the greatest advantage of belonging to a group. From sharing experiences with other parents, learning and understanding about what makes the hyperactive child act as he does, co-operating with school and teachers all have helped my child to do better in school and our family to be happier at home.

I am really happy to [illegible] to express my gratitude for the opportunity of attending our group sessions.
If you could only understand the overwhelming change that has taken place within my child! Wish many parents have been the last chance for our [illegible] are the guilt things. The [illegible] talking - listening to teacher - other parents, also, exchanging articles - books. Has given me knowledge - support to do more for [illegible] since I joined the group than I did in the past ten years. I believe these groups are responsible for making others aware and educate that the child can do need understanding. It helps like your work [illegible] understanding make the possible

Forever grateful.

[illegible] group work has provided me with the opportunity

1) to discuss with other the everyday problems, fears and frustrations involved in caring for my hyperactive child

2) to learn more about and discuss the common problem, namely hyperactivity, with other who understand it both intellectually and emotionally

3) to help provide and also receive encouragement

4) to help other parents who are also feeling lonely, frustrated, guilty, depressed, hopeless, etc

HOW TO FORM A DISCUSSION GROUP OF YOUR OWN

1) We have a home-school coordinator (school social worker) as our coordinator.

   You will need someone to coordinate your group. This may be a school principal, interested teacher, interested parent, social worker, or through your community school program.

2) We have an interested group of parents who meet together.

   You will need to locate concerned parents. You may notify by notes with school children, evening meetings with interesting speakers, PTA, church bulletins, letting your local doctors recommend parents, newspaper articles, local TV and radio, bulletins in stores, or word of mouth (neighbor-to-neighbor).

3) We do a variety of things at our group meetings.

   You will need a variety of ideas of ways to share your concerns at group sessions.

   You may want to:
   - Read booklets, books, magazines and any available literature.
   - Use films and/or video tapes.
   - Have speakers - allow for questions and answers.
   - Role play and discuss various situations.
   - Listen to each other - and especially offer a listening ear to new group members.
   - Share concerns and experiences.
   - Offer each other encouragement.
   - Share materials and sources.
   - Share sources of help.
   - LISTEN -- SHARE -- CARE.

4) We meet in a room in our Junior High Building.

You may find a room in a school, church, or home. We have also met in the park and on the playground during summer months when we brought our children along - so they, too, could share.

5) We have been fortunate to have Junior High students as baby-sitters during our group meeting time from 9:30 a.m. to 11:00 a.m.

You may want to inquire about the possibility at your Junior High or High School. The baby sitting room is available and all materials are supplied or made by parents or sitters. Large cardboard boxes, old card tables and old bed spreads for tents, large paper bags, well-worn books and used toys make up our supplies. The sitters volunteering are boys and girls from a study hall. We feel this service has:

- Made it possible for some of us to afford to come to meetings.
- Been good training in social awareness for our pre-schoolers.
- Been good training for the sitters, as well as making jobs available. Many of us know the qualifications of the Junior High sitters and hire them for evening baby sitting in our home.

6) We meet bi-weekly.

You will have to determine your needs to see if weekly, monthly, or bi-weekly sessions are the desire of your group.

7) We have parents assigned as callers to remind group members of each meeting, to see if transportation is a problem, to welcome new members, and to inform members of scheduled speakers, meetings, etc., in the area outside of our local school district.

You will have parents who will appreciate these personal contacts.

8) We don't get too concerned about *"numbers"* of people present at our sessions.

You, too, will find that 6-8 parents can share constructive suggestions and *"listening ears"*. It will depend on the time of day. At our day meetings we have had as few as 4, as many as 25. One evening we had 85 to hear speakers such as, a psychologist and a learning disabilities expert.

Our group coordinator has a goal for our meetings - that each of us will share at least one suggestion or personal experience and that each of us will leave with one new idea in mind that we'd like to make use of during the following week.

We have used the same procedure listed above for other groups in our school system.

You can adapt it to groups such as:

- Reading Problems.
- Growth and Behavior Study.
- Visual Development Concerns.
- Speech Helps.

We sincerely hope that this booklet has been helpful to other parents of hyperactive children and that it has been a source of understanding to teachers and others who work with these very special young people.

- YOU ARE NOT ALONE -

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Plus numerous other pamphlets, magazine and newspaper articles.

OUR THANKS TO . . . .

Essexville-Hampton Public Schools for taking a lead in trying to understand our children and helping them to function in the classroom.

To classroom teachers who have worked with our children.

The Title III Project, Staff, and Director, Herbert Escott, for making it all possible.

Our home-school coordinator, Judy Berg.

Dr. and Mrs. Sheldon Rappaport for their information and concern.

Dr. Harold Sommerschield, Child Psychologist.

Our families and friends who try to understand and cooperate.

A Parent Discussion of Hyperactive Children

EC081447

YOU Are Not Alone

What It Is :

The video tape you are about to see was prepared during a group session with parents of hyperactive children. At this session parents are meeting with support personnel from the Essexville-Hampton school staff. By meeting with the parents--hearing first hand expression of feelings and concerns--support personnel are better able to understand parent frustrations and concerns. They are able to gain insight into the problems encountered with raising a hyperactive child and are more sensitized to help the teacher in the classroom to program for the child.

This tape has been edited, primarily due to its length. We have tried to highlight points that have been surfacing during discussions throughout the two and a half years this group has been meeting together.

Why It Was Made :

The parents had three purposes in mind when preparing this tape, namely:

1. Help other parents see that they are not alone in their concern regarding their hyperactive children.

2. Help teachers to have a better understanding of the frustrations and the concerns of the parents--the problems of the home with neighbors, friends, relatives, and the immediate family.

3. Show how the group process--the sharing of ideas and concerns can be helpful to many parents--a process that could be duplicated in any community with different interest groups.

How It Could Be Used :

This video tape is thirty minutes in length. It is more conducive to good learning and retention if you are aware of things for which to watch. Therefore, our suggestions in using this tape are:

1. Have the group leader preview the tape ahead of time.

2. Note that there are twelve (12) natural breaks in the tape. (There will be a little fuzziness or lines running up and down the screen). You could stop the tape at any of these points to allow for discussion.

3. Keep in mind that these folks are not professional actors. They are just common, concerned people meeting together to have a discussion and sharing of concerns because they feel what they are doing will help children--their own children, your children, and all children.

4. A summary discussion should follow the viewing of the video tape.

5. A summary of each of the 12 segments is outlined in this pamphlet. You may want to read them over both before and after viewing the tape.

****

We hope you enjoy this video tape. We hope you will discuss and share with each other your thoughts and concerns about hyperactive-children--just as we have shared in bringing this tape to you. We have tried to be open and honest because only in this way can we really help you to better understand us--and ultimately our children. Our children are

our most precious possessions. Please, try to understand, respect, and love them as we do.

What It Includes :

Segment #1

Mrs. Judy Berg, Home-School Coordinator, who has been working with this group for two and a half years, gives an introduction including the purpose of the tape. Support personnel are introduced including a psychologist, reading consultant, learning disabilities consultant, and speech pathologist. These people are termed "backstop personnel" and their role is defined.

Segment #2

Parents identify themselves and tell the ages of their children. Note that they range from four to twelve--from pre-school to junior high. Also note a parents comment, "Boy! Boy! Boy! Boy! Does that tell you anything folks"?

Segment #3

Parents discuss usage of the terms hyperactive, hyperkinetic, and minimal brain dysfunction and tell that they use them interchangeably in their own group.

Segment #4

Diane, mother of a four year old explains the channel she has pursued in getting

help for her child, her family and herself. Her child's behavior is described in detail. You will note her frustration in just talking about it while sharing with the group.

Segment #5

Other parents share the type of behavior they have noted in their children. Some note similar behavior expressed in segment #4 and others tell of other things they have noted. The range is extreme--from tantrums, the exertion of an abundance of physical energy, and the verbal expressions including screams, the "driven" behavior of the child, and the "can't wait, must do it now" child.

Segment #6

Jackie, mother of a 12 year old junior high son, states that listening to segment #5 "brings back memories". You will note the changes as the child gets older, adjusts to medication, and learns to understand and manage his own behavior. Jackie expresses a type of "hope" that the parents of the very young hyperactive child view as the "someday--maybe".

Parents also express how they handle the child and themselves during excessive outbursts. They describe the type of teacher and parent they consider best in working with the hyperactive child. They stress the building of "self-concept" as an ongoing "must" with their children.

Segment #7

Jackie, mother of a 12 year old, discusses the advantage to her child of an away from home camp situation. Elaine, mother of

an 11 year old, expresses the contrast or opposite effect on her child--how he took it as a rejection.

One mother states regarding the child, "He's his own worst enemy".

Segment #8

Marilyn, mother of an 11 year old, expresses her concerns and frustrations regarding her child's try-out for a Little League team. She discussed hyperactivity with the coach and offered him literature on the topic so he could better understand her son. She knows the need for good peer relationships and sportsmanship, but also recognized these are two traits that are often weak in the hyperactive child.

Another parent expresses how "logging" her child's activities was helpful in trying to pin-point when the disruptive behavior was set off.

You will hear a parent discuss the value of including the child in the parent-teacher conference--also expressing very honestly and openly that she too has problems and was very fearful of the approach at first.

You will hear parents express that the home and the school must work together-- "that's what it is all about if we want the very best for our kids".

Segment #9

Very openly, the parents show the complete frustration of being told "to do something with your child" and not knowing what else

to do. Oh, how they wish others would be more understanding.

One parent exclaims, "What the hell do you want me to do"? Another pounds her fist on the table and says, "That's exactly what I have been told--but what can I do"?

Segment #10

Parents discuss literature and the importance they feel in sharing it with others. Note that they feel most of the good material is from Canada, which they have concluded is ahead of the United States in working with and understanding the hyperactive child.

They express appreciation for the help their children are getting in the regular classroom in the Essexville-Hampton school system--not a down-the-hall approach.

Segment #11

Vickie, mother of an 11 year old, expresses just what it has meant to her to be a part of a group--the great part of knowing that "I am not alone".

Segment #12

Summary and conclusion including a parent written preamble for the group.

"Remember that our children are our most precious possessions. Please, try to understand, respect and love them as we do".